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ABSTRACT

This learning guide is designed to connect personal, family, and job responsibilities for adults and out-of-school youth in economically depressed areas of the state (including transitional ex-offenders and corrections populations) so that individuals learn to manage and balance these aspects of their lives in order to prepare for or continue successful employment. This learning guide contains four competency units that provide information on parenting skills for parents of infants, toddlers, and preschoolers. The competency units cover the following topics: (1) the nurturing roles and responsibilities of parents; (2) expectations for the physical, mental and intellectual, emotional, and social development of infants, toddlers, and preschoolers; (3) ways to foster emotional, motor, intellectual, and language development for this age group; and (4) procedures and precautions for providing a safe, healthful, comfortable environment. Each competency unit consists of learner outcomes, key ideas, definitions, teaching strategies and methods, and suggested learning activities. Thirteen supplements include information and activity sheets on the following: parents' feelings; children's needs and how to meet those needs; parent job description; developmental milestones; toys for various ages; enhancing children's social, emotional, and motor development; safety hazards; emergency numbers; solving common problems; recommended immunizations; and an immunization record. A bibliography lists 26 references. The Illinois goals for world-class education for the 21st century also are included. (KC)

ED 388 810

Strengthening Parenting Skills: Infants, Toddlers, and Preschool

CG020 205

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PROJECT CONNECT COORDINATORS COMMITTEE

Project Director:
Mary Beth Stine

Contract Administrator:
Susan P. Burge

Coordinators:
Phyllis Bubnas
Brenda Ferguson
Bessie Hackett
Mary Lou Hubbard
Mary Jo Oldham
Carol McGee
Vicky Turl
John S. Washburn
Brenda Yates

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Learning Guides were written and field tested at Southern Illinois University, Carbondale, Illinois 62901 under the direction of Phyllis Bubnas and John S. Washburn.

Researchers were Beth Anderton, Deborah Lustman, and Judy Martin-Lighty. The word processor for this project was Marilyn R. Juhlin.

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General Guidelines/Checklist for Users

The terms "facilitator" and "learner" are used throughout to describe the instructor and participants.

STRATEGIES (for facilitators) and ACTIVITIES (for learners) as stated in the guide, are not always parallel as to numbering system.

Facilitators need to find out where learners are with each of the competencies. For example, if working with a group who may have had some previous child care instruction, the facilitator may choose not to do all the competencies. If working with a JTPA client, for example, it might be necessary to cover all competencies.

Key to Symbols - The following symbols are used throughout the guides to designate enhancement activities:

- related basic skills, giving particular attention to language arts and mathematics
- related decision-making and problem-solving skills, including the application and transferability of these skills to personal, family, and work responsibilities to be demonstrated
- enrichment activities according to learner abilities and experiences
- interrelationship of concepts to personal, family, and work
- influence of technology on the subject matter, application of knowledge, and related work
- pre- and/or posttest assessment activities

Before addressing any of the competencies, the facilitator should check in advance to see what materials or preparations are needed for the competency as numbered.

Competency #1 - Explain the nurturing roles and responsibilities of parents.

_____Find out who your participants are and their background experiences. This may take more than one conference or session or you may use an information form.

_____Have learners complete the sample checklist "How Do You Feel About Being a Parent" (Supplement 1) to identify feelings of learners. Select only those items you feel apply.

_____Collect needed magazines such as *Parenting*, and *Child*, and/or pictures to be used in activities such as

- selecting pictures depicting parenting roles.
- selecting pictures depicting responsible parenting.

_____Prepare a checklist of characteristics of a responsible parent.

_____Collect newspaper articles illustrating examples of responsible and irresponsible parenting.

_____Duplicate the list of things a child needs (Supplement 2).

_____Provide a format for learner to take home for writing a "Help Wanted Ad" (Supplement 3).

Competency #2 - Determine expectations in the physical, mental/intellectual, emotional, and social development of infants, toddlers, and preschoolers.

_____Provide magazines (such as *American Baby* and *Parents*) for learners to find pictures of children at different stages and categories of development.

_____Determine if duplicate copies are needed for Supplements 4, 5, 6, and 7.

Competency #3 - Describe ways to foster an infant's, toddler's, and preschooler's social, emotional, motor, intellectual, and language development.

_____Determine if duplicate copies of Supplement 8 are needed.

_____Have references such as *The Developing Child* on hand to refer to for case studies and other examples needed.

_____Prepare case studies of toddler actions and parent reactions for learners to critique.

_____May need to provide learners with pictures of or actual household items or toys that a child could play with to foster development.

_____Collect pictures depicting appropriate items to simulate categories of development.

_____Provide items to learners for mobile if they cannot.

_____Determine if supplies need to be provided for learners to make their own toy.

Competency #4 - Identify procedures and precautions in providing a safe, healthful, comfortable environment for infants, toddlers, and preschoolers.

_____Consider inviting a pediatrician or other medical personnel in to discuss immunizations with learners.

_____Prepare and duplicate a "Take Home Checklist on Poisons" or "Home Safety Checklist" or handout information on specific topics such as safe cribs. May also invite a school nurse or emergency room nurse to talk to learners.

_____Prepare a display of safety devices.

_____Prepare a bulletin board showing common child accidents.

_____Collect newspaper accounts of child injuries for discussion.

_____Collect pictures of nutritious food that help children grow.

_____Bring in toys or collect pictures to evaluate.

_____Bring in children's garments for learners to evaluate.

_____Provide catalogs for learners to find pictures of toys.

_____Duplicate Supplements 9, 10, and 11 if desired.

_____Prepare a display of harmful drugs and lotions.

_____Compile a directory of support services in the area.

_____Duplicate Supplements 12 and 13 for information on immunizations.

Introduction

Parents, like actors, must play different roles. As their children grow from babyhood to adulthood, there are distinct cycles such as preschool years, grade school years, the adolescent stage, and so on. Each of these periods involve different responsibilities and obligations on the part of the parent. Parents need a great deal of patience and understanding if the child is to become a happy, well-adjusted person.

For parents, the preschool years (including infants and toddlers) are often the hardest because young children require a great deal of care during this period. It is, however, one of the most rewarding periods.

During a child's preschool life, parents are usually the role model of the person children would like to be when they grow up. Therefore, it is important that parents set a good example for their child. If the parents are mature, well-adjusted persons, the child has a good chance of becoming such a person also.

Parenting requires taking care of children in all the ways that children need. It means meeting children's physical needs (such as food, clothing, rest, care, and a safe environment), mental needs (such as helping the child to learn), and social needs (such as providing love, affection, and a sense of security).

Parenting requires a knowledge of children and an understanding of the stages of development and activities appropriate for those stages. It also requires understanding, patience, love, and respect. Some of this can be learned in classes or by reading, and some through experience.

A parent's primary role during infancy and preschool is to provide the positive development of a child's self-concept (how they perceive and feel about themselves). The emotional well-being of children for the rest of their lives is affected by the love and self-worth developed and given to them early in life by their parent(s).

How positive children feel about themselves is influenced by how the parent acts and responds to them, letting the children know they really love them.

A parent may need to be reminded that every baby is an individual with a unique personality and distinctive and special qualities (Rothenberg et al., 1982).

In order for a parent to nurture a child, a parent also needs to be nurtured. There are some basic needs that all adults should meet regularly:

- a healthy diet
- adequate rest
- exercise (e.g., walking, dancing, jogging, and jumping rope are good tension releases)
- time alone each day, even if only a few minutes
- doing something enjoyable each day
- contact with other adults
- diversions (something away from home not related to child care)

COMPETENCY ONE

Explain the Nurturing Roles and Responsibilities of Parents.

Learner Outcomes

- Given a series of pictures, the learner will indicate the roles being performed by the figure (e.g., empathy, teaching, discipline, love, and acceptance).
- Using profiles, the learner can differentiate between responsible and irresponsible characteristics in parenting.
- Given a list of children's needs, the learner will describe ways to provide or meet those needs.

Key Ideas

Becoming a parent involves learning a new role, undergoing many changes, accepting new responsibilities, and experiencing new emotions (Rothenberg et al., 1982).

The goal of parenting is to raise a happy, healthy child who will develop into a responsible, contributing adult (*Life Skills*, 1988).

A parent's primary role during the infant, toddler, and preschool years is to provide for all the child's needs and wants and to help the child grow.

It is important for parents to provide not only a child's basic survival needs but also the child's emotional needs including love and self-worth.

Babies will feel safe, secure, and loved when they know someone will be there to take care of all their needs (Rothenberg et al.,1982).

One of the most important responsibilities of a caregiver is to keep a child safe and away from possible danger.

Definitions

infant	- birth to one year old
toddler	- one to three years old
preschool	- four to five years old
parenting	- loving and caring for children, helping them to grow; providing support, care, and love in a way that leads to the total development of the child
parenthood	- having children
nurturing	- loving care, attention, and encouragement that builds up a child's self-esteem
loving	- a warm attachment and feeling for someone
caring	- to watch over and attend to
self-esteem	- how we feel about ourselves
physical needs	- food, water, clothing, shelter, rest, and care
emotional needs	- love, encouragement, and affection
mental needs	- self-worth, help with learning
social needs	- relationships with others, sense of security
roles of parents	- protector, caregiver, provider, counselor, manager
caregiver	- someone responsible for providing care for children
responsibilities	- obligations and duties; parents accept responsibility for their child's physical needs, and provide guidance and a nurturing climate for the child

Parenting is a great challenge and a long-term commitment, but it can also be a very fulfilling and rewarding experience (*Life Skills*, 1988).

Strategies/Methods

1. At the beginning of the session, the facilitator may do a K-W-L activity. Learners list what they *Know* about parenting and what they *Want* to know about parenting. At the end of the session, have the learners list what they *Learned* about parenting. ☑

2. The facilitator will want to determine who the participants are and their backgrounds. Conference(s) or an information form may be used.

3. A checklist (Supplement 1), "How Do You Feel About Being a Parent," can be used to identify feelings of learners. Select only those items the facilitator deems appropriate.

4. The facilitator should reinforce what is included in each of the need categories (i.e., physical, emotional, mental, and social) and how these are met. The facilitator may have the class brainstorm a list.

5. The facilitator should reinforce the concept of responsible and irresponsible parenting. These can be compared and contrasted by using current and real-life examples from newspaper articles.

6. The facilitator might ask learners to identify ten things every child needs. This might be duplicated for a lesson or to take with them and also be used as a transparency. (See Supplement 2.) This also relates to Competency 3.

7. A "Help Wanted Ad" format for a parent is provided in Supplement 3. The facilitator might duplicate it for learners for Activity 3. Before doing Activity 3, the facilitator will need to discuss the various sections. For example,

   - Salary - how much does it cost to send a child through school?
   - Qualifications - what does a parent do? (e.g., change diapers, fix toys, answer questions)
   - Fringe benefits - what are some of the warm feelings one can experience?

8. Clues about learners' feelings, values, and needs can be obtained by having learners complete statements such as

   - "I like being a parent because . . ."
   - "I don't like being a parent because . . ."
   - "I could be a better parent if . . ."
   - "The three most important qualities a parent should have are . . ." ☑

9. The facilitator may want to examine parents' feelings. Discussion questions might include the following:

   - What kind of parent would you like to be?
   - What do you like most about you as a parent?
   - What makes you feel good about yourself?

10. Some discussion starters that the facilitator can use include pictures, questions, and check sheets. *Pictures* could be cartoons or pictures which can depict myths, humor, problems, and joys. *Questions* can be utilized such as What factors influence a person's readiness to become a parent? What skills are necessary for good parenting? and Do children have rights? *Check sheets* can be developed for reacting to problems and concerns.

11. The facilitator should reinforce the idea that children become more and more independent as they age and this changes the role of the parent.

Suggested Activities

1. Have learners identify ten things that every baby needs (i.e., physical, emotional, mental, and social).

   For example, every child needs . . .

food	water
clothing	shelter
rest/sleep	safety
affection	love
protection	comfort
encouragement	warmth
good health	
to be clean	
to be around people	
things to do	
things to look at	

   (See Supplement 2.)

2. Make a collage or collect pictures from magazines which depict responsible parenting.

   Points to make: Parents are responsible for providing their child with the following:

   - **food**
     (appropriate nutrition for age)
   - **clothing**
     (appropriate for age and weather conditions)
   - **rest/sleep**
     (appropriate for age)
   - **a safe environment**
     (free of dangers)
   - **nurture**
     (love, affection, shelter)
   - **support**
     (self-worth, self-esteem)
   - **encouragement**
     (to learn)
   - **guidance**
     (to do the right thing)
   - **good health**
     (medical care/treatment)

3. Write a "Help Wanted Ad" for a parent including qualities required, skills needed, time needed, salary, and fringe benefits. (See Supplement 3.)

   Points to make: The job of parenting is day and night, seven days a week, 365 days a year. The job of parenting requires knowledge about children and their development; skills to meet children's needs; personal qualities such as patience, love, understanding, and respect; and for the parent to pay for all of the child's needs.

4. Have students identify someone in their life that has served a parenting role to them. Ask them what they did in this role.

   Points to make: Many people other than the mother or father can parent. Parent roles provide guidance, feelings of security, protection, care, and meeting of needs.

5. Have students identify five things that a parent could do or give a child at any time to make the child feel good about him or herself. For example,

smile	cuddling
happy face	hug
attention	kiss
hold hands	rub
rub noses	caress
look at	squeeze
a soft touch	sing
throw a kiss	
pat on the head	
scratch back gently	
say "I love you"	
say "I'm proud of you"	

Determine Expectations in the Physical, Mental/Intellectual, Emotional, and Social Development of Infants, Toddlers, and Preschoolers.

Learner Outcomes

- Using the chart provided, the learner will be able to identify where his or her child is developmentally.
- Using the chart provided, the learner will be able to identify expectations of a child at different ages and stages.
- Give examples of how preschoolers communicate, how they behave, and how parents respond.

Key Ideas

All children grow and develop differently. Siblings are not alike and parents should not compare child to child.

A child's development is a natural process and therefore cannot be pushed or sped up.

All babies follow the same general patterns of development but at different paces. Regular medical checkups can assure the parent that the child is progressing normally.

A parent should not expect exact forms of early language. Language can be strengthened when the parent interprets and responds to what the child is trying to say.

Definitions

social development	- the progress a person makes from a baby's complete self-centeredness to an adult's ability to live and work with others (Brisbane, 1985) OR relationships with others
emotional development	- deals with children's changing feelings about themselves, others, and the world (Brisbane, 1985) OR feelings
motor development	- skills which involve the control and use of large muscles (such as walking) or small muscles (such as holding a spoon) (Brisbane, 1985) OR the use and coordination of the different parts of the body
mental/intellectual development	- the use of the mind and thinking skills (learning about him- or herself depends on the responsiveness of the caregiver)
language development	- the maturation and coordination of the throat muscles, tongue, lips, teeth, and larynx; to understand and use words (Brisbane, 1985) (In this competency, language development is not addressed but it is a part of mental development.)

Strategies/Methods

1. A parent needs to know that each child has a different personality and will develop at his or her own rate. Parents should be helped to understand that an infant will be unlike any other and that the challenge of parenting is to help their children discover who they are and what talents, strengths, and weaknesses they may have.

2. The facilitator may need to make distinctions between an infant and a toddler. The most obvious change in infants is related to physical size and development.

3. Using a checklist would be desirable to determine how much the parent is aware of his or her child's development and to determine whether the child is characteristically infant or toddler age. (See Supplement 4.) ☑

4. The facilitator may need to assess the age of the learner's child (use picture chart in Supplement 5), and emphasize that a child's development is sequential and that developmental tasks may not coincide exactly with the child's age.

5. Provide magazines such as *Parents* or *American Baby*. Have learners find pictures of children at different stages of development (e.g., baby holding up his or her head, baby sitting alone, baby being fed). The learner could be asked to arrange pictures in developmental order.

Suggested Activities

1. Using the chart provided, have learners discuss expectations of their children's development. (See Supplement 6.)

2. Have learners view the picture chart of ages. (Purpose being that parents understand expectations and developmental progress of their child.) (See Supplement 5.)

3. Have learners find pictures of children from magazines at different ages and stages of development (one for physical, mental, emotional, and social). ♀

4. Have learners visit a nursery school or day-care facility to see how infants, toddlers, and preschoolers communicate (e.g., how an infant would communicate when hungry). The facilitator may vary the activity by having learners give examples of their children's behavior and how they respond. The learners can then exchange ideas on how they handle specific situations. ▣ ♀

5. Using the developmental chart, pick out five changes that occur in a child during the first five years of life. (See Supplement 6.) ▣

6. Using Supplement 7, "Toys – Developmental Expectations," identify how different aged children would use items listed. ♀

COMPETENCY THREE

Describe Ways To Foster an Infant's, Toddler's, and Preschooler's Social, Emotional, Motor, Intellectual, and Language Development.

Learner Outcomes

- Develop an understanding of the importance of responding to children and providing tactile, visual, and verbal stimulation as central to effective parenting.
- Determine appropriate skills and actions for children to learn at given stages of development.
- Using pictures or objects, the learner will identify which are appropriate examples for encouraging development in social, emotional, motor, intellectual, and language categories.

Definitions

(See those listed in Competency 2.)

Key Ideas

Children will learn more from what they see than from what they hear. How parents and caregivers respond to children greatly impacts their development.

All babies need intellectual stimulation—sounds to hear, colors to look at, and things to do.

Babies learn more and faster when their parents or others answer their cries, smile at them, talk to them, and play with them.

Children up to two years of age think only of themselves.

Parents need to be aware that a child wants and needs more than gives. However, a child gives smiles, hugs, and kisses.

Intelligence develops more rapidly before the age of three than at any other time of life. Everything is interesting, even shoes.

Children have a natural eagerness to explore and learn which helps them to develop self-confidence and independence.

Toddlers strive to become independent and have others accept them as they are (Decker, 1988).

A baby's means of communication is crying. A parent must learn the different cries.

Parents should guide a preschooler's behavior rather than discipline it. Preschoolers are not capable of understanding discipline fully.

Children need to be taught and shown how parents want them to act.

Sometimes children misbehave to test a parent. An important part of caring for children is knowing how to set and maintain limits to guide their behavior.

By guiding a child's behavior, parents are telling a child

- the things they do *not* want the child to do,
- why they do not want the child to do it,
- the things they *do* want the child to do,
- why they want the child to do the other thing, and that
- they still love the child as a person (Myers-Walls, n.d.).

Ways To Boost a Child's Self-Esteem

Tell your child how special he or she is and that you love him or her.
Give your child smiles, hugs, and kisses.
Recognize positive things your child has done; praise and compliment the child.
Spend time together; do activities together.
Give your child choices.
Encourage your child's curiosity and independence.
Listen and respond to your child.
Talk to and explain things to your child.
Guide your child's behavior.
Keep your child safe.
Set a good example for your child.
Provide your child with a positive environment.
Help your child when necessary.
Never hit your child.

What Kind of Guidance Is Right for Your Child's Age?

1. ***Small babies*** *do not need discipline. They do not act badly on purpose. They are not trying to make you angry or control you by crying. Babies who cry usually need something. They might be hungry, wet, tired, in pain, or need to be held. A baby cannot be spoiled for the first six months. Babies who are picked up when they cry learn that they are safe and can depend on the world. Usually they will cry less later on. As soon as they can talk, they will use words to tell you what they need.*

2. ***Crawlers*** *often get into things. Remember to babyproof the house. Use distractions when the child does something you do not like. Use "stop" and "don't" and tell the child the rules. Give the child the chance to explore safely in at least one room in the house.*

3. ***Walkers*** *can reach higher things. They are learning to climb. Babyproof the house. Use distractions as a guidance. Tell them the rules. Start using short time-out periods. Use a chair in the same room for the time-out spot.*

4. ***Runners, jumpers, and climbers*** *are talking more now. You can explain things to them. Also, listen to what they have to say. Use rewards whenever you can. Claps, extra hugs, and praise are very good to use. Use time-out if necessary. You could put them in a room away from you for their time-out spot. Start letting the child make some choices* (Brisbane, 1985).

Adapted from: Myers-Walls, J. A. (n.d.). *Why won't you behave? Discipline strategies with young children*. West Lafayette, IN: Purdue University Cooperative Extension Service.

Strategies/Methods

1. The facilitator should reinforce the idea that the more that is done with a child, the more the child will learn.

2. Stress that time with a child does not have to be planned. Parents can include a child in many daily activities. The group might contribute examples like allowing a child to help as tasks or chores are being done by the parent.

3. Reinforce the idea that children become more and more independent as they age and this means the parent's role changes. In their efforts to achieve independence, children may become stubborn or make mistakes. At these times they need kindness and acceptance from adults (Decker, 1988).

4. Parents may experience negative feelings because of children's demands. The facilitator might want to discuss these. As the facilitator, if you feel a parent needs more discussion on dealing with frustration and anger, you might reinforce the idea that EVERYBODY feels this way sometimes. Parents have to learn to handle their feelings and not let things get out of control. If a parent feels things are getting out of control, suggestions might be given such as putting the child in another room until the parent has calmed down or calling someone (e.g., mother, boyfriend, or parents' hotline). IT IS NEVER ACCEPTABLE TO TAKE OUT ANGER ON YOUR CHILD. Refer to box on guiding behavior. Discipline and punishment are covered in Learning Guide 2. Emphasize guidance versus discipline before school age.

5. Facilitators could use the chart in Supplement 8 to help learners understand what skills a child is ready to learn, to decide how to help the child learn, or simply to confirm that the child is growing at a normal pace.

   The facilitator may want to emphasize that such charts should only be used as a guideline to show developmental order and times when things happen. Children develop at their own rates. Charts are not intended to be all-inclusive but, rather, to stimulate thinking.

6. The facilitator could select case studies of toddlers' actions and parents' reactions. This can also be done with observations. Emphasis should be to stimulate positive reaction. ☑

   Examples of case studies are found in resources such as *The Developing Child.*

7. The facilitator can use Activity 9 as a pre-/posttest. ☑

8. Help learners to recognize that at the preschool level, strength and coordination increases; therefore, preschoolers need room to run, jump, climb, throw balls, catch, hop, skip, and tumble.

Suggested Activities

1. Have learners identify pictures of or bring in ten different household items or toys that a child could play with to foster the child's development. Examples include an unbreakable mirror or dolls for emotional development; puppets or tea cups for social development; drinking cup, spoon, or ball for motor development; measuring cups and spoons or books for intellectual development; and play telephone, music, or clock ticking for language development. The facilitator may expand the activity by having learners make a toy for their own child(ren) from common household items (e.g., depending on creativity levels, bag puppets, sock dolls, or bean bags).

2. Collect pictures from magazines which depict appropriate items that could stimulate a developing infant or child's social, emotional, motor, intellectual, or language development. For example, a telephone could be used to stimulate language development.

3. Bring in examples of items such as nesting bowls and determine which would be appropriate or inappropriate for stimulating a child's development in one of the developmental categories or at a particular stage.

4. Have learners construct a mobile out of household items that could be hung over an infant's crib. Have learners verbalize the value of the particular items and mobile. Stress ease, low cost, and safety.

5. Have learners write down or tell five to ten ways o boost a child's self-esteem.

6. Have learners identify appropriate ways to respond to a child to encourage language development (or social, emotional, and so on). For example, babies cry to communicate; a caregiver's response to this crying will affect the child's emotional development.

7. Have learners observe toddlers and note development being displayed in activity such as throwing objects (motor) or sorting shapes (intellectual).

8. Have learners act out plots in which adult action could cause a child's loss of self-esteem and other actions which would develop self-esteem. For example, belittling comments or ignoring children could cause the loss of self-esteem. To develop self-esteem, give acceptance, encouragement, and love. References such as *The Developing Child* have case plots that could be used.

9. Have learners indicate whether the following statements are true or false as related to guiding an infant's, toddler's, and preschooler's behavior:

   - Small babies act badly just to make you angry. (false)
   - A parent needs to babyproof a home as the child begins crawling. (true)
   - Children need opportunities to explore their environment. (true)
   - Children do not need the rules explained to them. (false)
   - It is *never* okay to take out anger on a child. (true)

COMPETENCY FOUR

Identify Procedures and Precautions in Providing a Safe, Healthful, Comfortable Environment for Infants, Toddlers, and Preschoolers.

Learner Outcomes

- Demonstrate ways to eliminate hazards and accidents associated with toys, home, and areas outside the home.
- Identify dangerous objects and situations which may need to be childproofed.
- Given a variety of potentially dangerous situations, the learner will determine proper courses of action.
- List good health practices adults can model for children in terms of nutrition, rest, cleanliness, exercise, and immunizations.

Key Ideas

The concept of a caring environment includes good health, safety, and the well-being of the child. This would include safety from fire or disaster, sanitation (eating, toilet, laundry), general safety (indoors and outdoors), disease prevention, toys, food, and clothing.

Toys can cause accidents if not properly made, if not proper for children, if not suitable for child's age or maturity, or if they are unsafe after wear or breaking.

Children's clothing should feel comfortable and be manageable. Clothes should provide for growth, safety, and self-dressing. Clothes have an effect on self-concept and self-esteem. It is important for children to dress like other children.

Dangers to a helpless baby are drowning, suffocation, and falls. Safety problems multiply with increasing mobility of the child.

Toddlers like to climb, open drawers and doors, take things apart, and play in water. Two-year-old children are like streaks of lightning. They learn by imitation but do not understand what is dangerous.

Preschoolers often are not content with their own backyard. Children's activities should be checked frequently. The three to five year olds need intensive instruction of safety.

NO child, regardless of family income, should go without immunizations.

Parents who need or want support in providing a safe and healthy environment for their child will find it available in most areas of particular need and in most communities. There are agencies, both state and federal, that can provide assistance. There are also local support groups that provide assistance.

Definitions

hazards	- a risk or potential danger to health
accidents	- an unpleasant, unexpected happening
childproof	- to eliminate potential hazards in order to avoid accidents
support	- agencies that help parents with financial, educational, and parenting problems and give counseling and advice

Strategies/Methods

1. The facilitator can have suggestions ready to share as to how adults can supervise children when they are busy doing chores or not feeling well.

2. The facilitator should stress examples of good health practices adults can model for children in terms of nutrition, rest, cleanliness, exercise, and immunizations.

   The facilitator should explain the importance of immunizations for babies and young children and stress that every child needs to be properly immunized. Also, the facilitator should discuss that recommended immunizations and schedules may change and various updates may be needed. A school or public nurse or doctor may be invited to discuss immunizations with learners. ☑

3. The facilitator can prepare materials to duplicate such as a "Take Home Checklist on Poisons" or "Home Safety Checklist" and/or information on safe cribs, for example. ☑

4. The facilitator can prepare a display of safety devices such as safety caps, adhesive strips for furniture, window locks, and identify how they would be used at home.

5. Create a bulletin board showing common child accidents.

6. Use newspaper or magazine accounts of accidents in which a child was injured or killed and discuss ways the accidents could have been prevented.

7. The facilitator might share symptoms of a young baby who is sick. Typical symptoms are as follow:

   - cold, clammy skin
   - pale, red, rash-covered hot, flushed dry skin
   - sleeps or cries a lot
   - high temperature
   - noisy, difficult, rapid, or very slow breathing
   - coughing or sneezing
   - irritated eyes
   - signs of pain, screaming
   - no appetite
   - vomiting
   - listlessness or restlessness
   - twitching, stiffness (Rothenberg et al., 1982).

8. The facilitator can have suggestions of needed equipment and supplies for a baby's medicine cabinet (e.g., children's Tylenol, Syrup of Ipecac, and bandages).

9. The facilitator might provide a display of or discuss harmful drugs or lotions used in a household and how to store them away from small children. For example, household cleansers should be stored up high or in a locked cabinet.

10. Create, collect, or secure any information or compile a directory of parent support services available in your local area. Using directory, work with learners to identify the nature of their need or problem and then locate resources. Resources to use to provide information could include telephone directories; school guidance counselors; hospitals; medical personnel; police; sheriff; newspapers; friends; relatives; hotlines; social service organizations; local city, town, or county government offices; local libraries; churches; continuing education programs; and parenting groups.

11. Invite a pediatrician or other medical personnel to discuss the types of immunizations the child should receive, when the child should receive them, and the reason for each. Provide learners with a copy of Supplement 12. Also discuss immunizations necessary for older children and adults. Provide each learner with an immunization record (Supplement 13) to take with them and fill out for family members.

Suggested Activities

1. Learners could observe a child-care center and note procedures taken to promote child safety and well-being. ◘

2. Have learners collect and display pictures of food that are appropriate for the age of their child(ren). Have learners list good health practices adults can model for children in terms of nutrition, rest, cleanliness, and exercise.

3. Have a toy display or look at pictures of toys for various age groups. Learners should develop a list of characteristics to evaluate toys. (Include toys appropriate for various ages and tell why.) ♀

4. Have the learners identify common household items used as toys. Categorize as safe or unsafe. Examples could include oatmeal box (safe), plastic measuring cups (safe), and scissors (unsafe).

5. Have learners examine sample children's garments and discuss and evaluate features such as safety, comfort, allowance for growth, quality of construction, care, and self-dressing features. Can also use catalogs showing children's clothing. ♀

6. Brainstorm a list of unsafe toys. Categorize according to their safety hazards such as sharp edges and small parts. Can also use pictures from catalogs.

7. Have learners look around their homes and make a list of hazards found in each room of their home and tell what they can do to prevent accidents. Use Supplement 9 for examples in kitchen. Other examples found around the home may be cords, curtains, doors, electrical outlets, waste baskets, garbage, windows, fireplaces, furniture, stairs, tubs, rugs, windows, grass materials, and toilets. ◘ ♀

8. Have learners list common home accidents. Categorize according to causes (e.g., poisons, fires, and falls).

9. Have learners complete chart with emergency information. (See Supplement 10.) ◘

10. Using Supplement 11, select situations to react to and determine proper course of action. ♀

11. Have learners determine needed equipment and supplies for baby's medicine cabinet. ☼

12. Have learners list agencies or resources in their community that can help with food, medicine, counseling, crises, money, employment, education, and child care. ◈

SUPPLEMENT 1

Learner Activity Sheet

How Do You Feel About Being a Parent?

DIRECTIONS: Place an "X" in the space provided to indicate your answer for each item listed.

	Agree	Disagree	Not Sure
1. Caring for children is a tedious and boring job.			
2. A good reason for having children is that they can help when parents are too old to work.			
3. Married couples would be happier if they did not have any children.			
4. It is only natural to want children.			
5. A couple ought to think seriously about the inconveniences caused by children before they have any.			
6. Having children around is a great mental strain.			
7. Having children makes a stronger bond between husband and wife.			
8. One of the highest purposes of life is to have children.			
9. It is the parents' fault if their children are not successful in life.			
10. Children can limit you in what you can do and where you can go.			
11. A young couple is not fully accepted in the community until they have children.			
12. After becoming a parent, a person is less likely to behave immorally.			
13. One of the things a couple should think about when deciding to have children is whether or not they can afford it.			
14. Having children can cause many disagreements and problems between husband and wife.			
15. One of the best things about having children is that you are never lonely.			
16. Raising children is a heavy financial burden.			
17. When you have children, you have to give up a lot of things that you enjoy.			
18. Before having a child, a couple should consider whether it would interfere with the wife's work.			

Adapted from Clark, L. (1988). The cost and values of American children. In *Family Life and Parenting Education* (p. 5). Nashville: Tennessee Department of Education.

SUPPLEMENT 2

THINGS YOUR CHILD NEEDS	WHAT YOU CAN DO
LOVE	Smile often at your child.
COMFORT	Touch your child gently.
SAFETY/PROTECTION	Hold your child during feeding.
FOOD/WATER	Talk nicely to your child.
SLEEP	Feed your child.
CLOTHING	Change your child's clothes when wet or dirty.
SHELTER	Cuddle your child.
TO BE CLEAN	Sing softly to your child.
TO BE AROUND PEOPLE	Rock your child softly.
THINGS TO LOOK AT AND DO	Go to your child when he or she cries.
THINGS AND PEOPLE TO HEAR	Keep child away from danger.
	Copy the sounds your child makes and make words from the sounds.
	Gently stretch and help the child move his or her arms and legs while dressing.
	Keep your child warm.
	Give your child objects to touch, suck, hear, and watch. Be sure that objects have no sharp edges or small parts.

DO NOT:

FORCE FEED YOUR CHILD
HIT YOUR CHILD
IGNORE YOUR CHILD

SUPPLEMENT 3

Help Wanted Ad

JOB TITLE: *Parent*

HOURS:

SALARY:

QUALIFICATIONS:

RETIREMENT BENEFITS:

OTHER FRINGE BENEFITS:

SUPPLEMENT 4

Developmental Checklist for Young Children

When you fill in the checklist, remember that each child develops at his or her own pace. The age listed on the checklist is the time when most children usually start the activity.

If your child is not doing one activity at the age listed, there is probably no need to be concerned. However, if your child is late in doing several activities, you should discuss it with your child's doctor.

(For the child under two years old who was born prematurely, subtract the length of prematurity from his or her age. For example, if a two-month-old baby was born one month early, his or her development should be compared to a one-month-old-baby.)

USUAL ACTIVITIES DURING . . .

1 MONTH

	Your child's age
Able to raise head from surface when lying on tummy	
Pays attention to someone's face in his or her direct line of vision	
Moves arms and legs in energetic manner	
Likes to be held and rocked	

2 MONTHS

	Your child's age
Smiles and coos	
Rolls part way to side when lying on back	
Grunts and sighs	

3 MONTHS

	Your child's age
Eyes follow a moving object	
Able to hold head erect	
Grasps objects when placed in his or her hand	
Babbles	

4 MONTHS

	Your child's age
Holds a rattle for an extended period of time	
Laughs out loud	
Sits supported for short periods of time	
Recognizes bottle and familiar faces	

5 MONTHS

	Your child's age
Reaches for and holds objects	
Stands firmly when held	
Stretches out arms to be picked up	
Likes to play peek-a-boo	

6 MONTHS

	Your child's age
Turns over from back to stomach	
Turns toward sounds	
Sits with a little support (one hand bracing him or her)	
Persistently reaches for objects out of reach	
Listens to own voice	
Crows and squeals	
Reaches for and grasps objects and brings them to mouth	
Holds, sucks, bites cookie or cracker	

7 MONTHS

	Your child's age
Can transfer object from one hand to other	
Can sit for a few minutes without support	
Pats and smiles at image in mirror	
Creeps (pulling body with arms and leg kicks)	
Is shy at first with strangers	

8 MONTHS

	Your child's age
Can sit steadily for about five minutes	
Crawls on hands and knees	
Grasps things with thumb and first two fingers	
Likes to be near parent	

9 MONTHS	Your child's age
Says "Ma ma" or "Da da"	
Responds to name	
Can stand for a short time holding on to support	
Able to hit two objects together on his or her own	
Copies sounds	
10 MONTHS	
Able to pull self up at side of crib or playpen	
Can drink from a cup when it is held	
11 MONTHS	
Can walk holding onto furniture or sides of crib or playpen	
Can find an object placed under another object	
12 MONTHS	
Waves bye-bye	
Can walk with one hand being held	
Says two words besides "Ma ma" and "Da da"	
Enjoys some solid foods	
Finger feeds self	
Likes to have an audience	

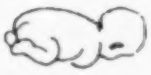
15 MONTHS	Your child's age
Walks by self; stops creeping	
Shows wants by pointing and gestures	
Scribbles on paper after shown	
Begins using a spoon	
Cooperates with being dressed	
18 MONTHS	
Can build a tower with three blocks	
Likes to climb and take things apart	
Can say six words	
Tries to put on shoes	
Drinks from cup held in both hands	
Likes to help a parent	
2 YEARS	
Able to run	
Walks up and down using alternate feet	
Says at least fifty words	
Sometimes uses two word sentences	
Points to objects in a book	

3 YEARS	Your child's age
Can repeat two numbers in a row	
Knows his or her sex	
Dresses self except for buttoning	
Can copy a circle	
Can follow two commands of on, under, or behind (stand on the rug)	
Knows most parts of the body	
Jumps lifting both feet off the ground	
Can build tower with nine blocks	
4 YEARS	
Can repeat a simple six word sentence	
Can wash hands and face without help	
Can copy a cross	
Can stand on one foot	
Can catch a tossed ball	
5 YEARS	
Can follow three commands	
Can copy a square	
Can skip	

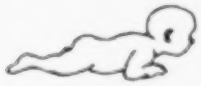
Adapted from *Parenting training curriculum* (Trainers Manual). (1981). Springfield: Illinois Department of Children and Family Services.

SUPPLEMENT 5

Sequential Development



0 month
Fetal posture



1 month
Chin up

2 month
Chest up

3 month
Reach and miss

4 months
Sit with support

5 months
Grasp object
Sit on lap

6 months
Grasp dangling object
Sit on high chair

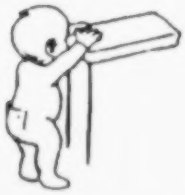
7 months
Sit alone

8 months
Stand with help

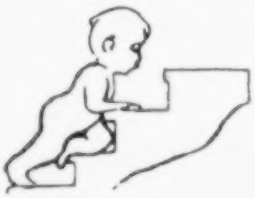
9 months
Stand holding
furniture

10 months
Creep

11 months
Walk when led



12 months
Pull to stand
by furniture



13 months
Climb stair steps

14 months
Stand alone

15 months
Walk alone

Source: Mawhinney, V. T., & Petersen, C. J. (1986). *Child development: Parenting and teaching*. Cincinnati, OH: South-Western Publishing Company.

SUPPLEMENT 6

What To Expect from Your Child

	0-6 months	6 months-1 year	1-2 years	2-3 years	3-4 years	4-5 years
PHYSICAL	Fists closed Lifts head Hands and arms move in a jerky way Sucking thumbs and finger Active reaching Uses hands to play Drooling Begins to laugh, gurgle, squeal, coo, and babble Almost crawls, rolls from stomach to back, and almost sits alone - still needs support Holds objects briefly	Begins teething Enjoys banging toys Baby sees object, reaches for it, mouths it, and looks at it Opens hands Sits alone Eats finger food Free rotation of wrists Pulling him or herself up Stands with little support Begins to use index finger to point, poke, hook, and pull Crawling, creeping, sitting, and babbling	Able to build and knock down Turns book pages Climbs into, under, and up on Walks Throws, kicks, hits, and punches Turns doorknobs Scribbles (off page) Unscrews small lids Opens and closes things Rides wheeled kiddie car Some ability to come down slide Begins writing Unwinds toilet paper	Can jump off a step Begins to throw, catch, and bounce a ball Pedals tricycle Begins to hop Walks up and down stairs (one foot at a time) Copies circles and simple lines Cuts with scissors Strings beads Builds six block tower Runs and dances	Begins to balance on one foot Turns somersaults Begins to skip Winds up toy Holds pencil correctly Traces along line Runs and jumps easily Completes basic toilet training Catches a large ball Uses spoon and fork Puts on shoes Feeds and dresses self Makes drawings	Hops on one foot Climbs and jumps well Throws a ball overhand Uses pair of children's scissors Brushes own teeth and washes face and hands Skips Rides tricycle well Buttons own shirts and coats Enjoys playing running games Walks straight line Uses knife and fork Pours liquids
MENTAL/INTELLECTUAL	Cries to communicate Coos and babbles Forms sense of self Says "ba, da, ma" Discovers hands and feet Explores through eyes Stares at things Turns head at sound of voice Listens to noises	Imitates words, sounds, and actions Develops memory of important people and events Grabs any and all objects within reach Enjoys looking at pictures May sing along with music Begins to remember past events and actions Begins to recognize familiar people and words Looks for objects going out of sight (peek-a-boo) Curious and interested in exploring Enjoys mirror image	Imitates others (especially parents) Spends time jabbering Imitates sounds Uses gestures to make wants known Looks at books Points to individual pictures Shows or points to specific object when asked where it is Follows simple direction Repeats words and actions Can learn and then forgets Able to find things hidden under cups Knows where things are and where they left them Wants to know how to use things Able to stack blocks Begins to group things by size, color, and form Begins to use two word sentences	Can identify self by first name Removes unfastened clothing Unbottons front buttons Removes pull-down pants Turns faucets on and off Washes hands Functions in present Interested in children's TV shows Uses objects in make-believe games Enjoys playing house Uses words to make requests Asks names of object and repeats them Discovers how things work	Becomes easier to please Tells own sex, full name, and age Can tell number of family members Puts on shoes Dresses with help Knows about sizes and color Answers simple questions Asks a lot of questions Attention span increases Identifies objects in pictures Speaks five to six word sentences Learns to count	Understands time Repeats rhymes, songs Asks "why" and "how" Tries new games Can answer telephone Likes to use silly names Likes to tell stories Speech may be fast with some stuttering Tells address Names colors Makes decisions about what they should or should not wear Prints a few letters Has conversations Writes their name with practice Uses complete sentences almost all of the time Describes pictures well Counts to ten alone Asks a lot of questions Understands that there are different seasons and holidays

What To Expect from Your Child (continued)

	0-6 months	6 months-1 year	1-2 years	2-3 years	3-4 years	4-5 years
EMOTIONAL	Expresses emotions with entire body Smiles back when smiled at Begins to recognize parents Develops trust of caregivers Responds positively to comfort; negatively to pain	Separation anxiety (fearful) Imitates and makes sounds for attention Will be affectionate Likes attention	Opinionated about likes and dislikes May develop some fears Interest is with the here and now Wants to do things for self (feeding and dressing) Is concerned with self May have anger outbursts Can be demanding - likes immediate responses to requests Says "no" for various reasons Becomes frustrated when he or she cannot accomplish a task Enjoys a routine - change is frustrating	Self-centered Likes immediate gratification Difficulty in waiting Displays jealousy May be afraid of dark Needs reassurance and approval May be aggressive	Plays make-believe Is more responsible for own actions Begins to think about others' feelings Occasional temper Aggressive Seeks parental approval Needs praise and encouragement when trying new things May be fearful of things Wants independence	Enjoys being read to Exaggerates things Often talks loudly Loves to tell stories Tells about feelings Feels confident Usually cooperative, happy, and agreeable May feel jealous Seeks praise and affection from parents
SOCIAL	Cries; quiets when comforted Smiles socially Visually interested in people More interested in people than toys Begins developing awareness of self as separate being Begins to recognize own name Tries to get attention of parent Babbles	Wants to interact with children May reach to be picked up Plays with toys for longer periods of time Increasing assertiveness and independence Negative reaction to unfamiliar people and places; afraid of strangers Imitation of parents and other family members Increasing interest in observing other children	Is self-centered and involved in own play Toys are more important than a child nearby Pushing, poking, and touching are ways of making contact Doesn't know how to make friends Enjoys company of parents Imitates adults doing adult activities Says "mine" and "no" Learns meaning of "no" Waves "bye-bye"	Has temper tantrums Wants independence ME is more important Difficulty in sharing Can play alone and in groups Is interested in peers	Plays alongside but not with others Begins to learn to share Wants a lot of adult attention Plays with imaginary friends Develops sense of self Begins using simple manners and grooming May learn to say "please" Enjoys tumbling, playing with other siblings and adults	Prefers to play with children their own age Gets along well in a small group Helps a younger sibling Enjoys playing at house Puts toys away Acts independently Learns fair play and sharing Makes friends easily Uses language with friends

Adapted from Rothenberg, B. A., et al. (1982). *Parentmaking: A practical handbook for teaching parent classes about babies and toddlers*. Menlo Park, CA: Banster Press.

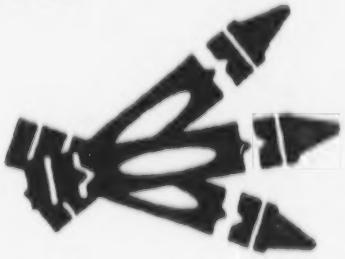
Creative living (3rd ed.). (1985). Mission Hills, CA: Glencoe/McGraw-Hill Publishing Company.

SUPPLEMENT 7

Toys–Developmental Expectations

INSTRUCTIONS: Pictured below are several common toys for young children and a list of ages for each toy. Identify what a child of the identified age would do with the toy.

1. Crayons

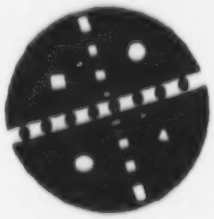


6 Months _____

1 Year _____

3 Years _____

2. Ball

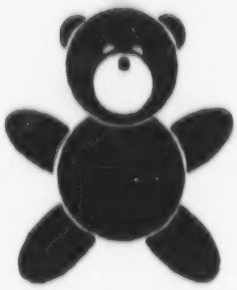


6 Months _____

1 Year _____

3 Years _____

3. Stuffed Toy



6 Months _____

1 Year _____

3 Years _____

4. Book

6 Months _____

1 Year _____

3 Years _____

Adapted from Sitting safely (Worksheet No. 4). (1988). Gerber Products Company.

SUPPLEMENT 8

What You Can Do for Your Child

	0-6 months	6 months-1 year	1-2 years	2-3 years	3-4 years	4-5 years
SOCIAL	Smile at your baby Talk and sing nicely to your baby Let baby be around people	Smile at your baby Talk and sing nicely to your baby Let baby be around people	Play: chase and catch, pat-a-cake, ring around the rosy Give your child little chores	Dress up dolls Help in kitchen or yard	Have a tea party Play games Let child help you in kitchen or yard	Play games Let child help you in kitchen or yard
EMOTIONAL	Hold and cuddle baby Quiet baby when he or she cries Hold your baby during feeding Touch and rub your baby gently Don't ignore Give encouragement and lots of praise Be positive Show your love by hugs and kisses and by saying "I love you"	A metal mirror Give encouragement and lots of praise Be positive Show your love by hugs and kisses and by saying "I love you" Don't ignore	Talk about feelings Cuddle child Own dish, cup, spoon Give your child your attention and your patience Give encouragement and lots of praise Show your love by hugs and kisses and by saying "I love you" Don't ignore Be positive	Give encouragement and lots of praise Be positive Show your love by hugs and kisses and by saying "I love you" Don't ignore	Talk about feelings Give encouragement and lots of praise Be positive Show your love by hugs and kisses and by saying "I love you" Don't ignore	Talk with child about day Give encouragement and lots of praise Be positive Show your love by hugs and kisses and by saying "I love you" Don't ignore
MOTOR	Give baby things to hold (your finger), reach for (dangling toys), and suck on (pacifier or bottle) Gently exercise legs when changing diapers	Give your baby a teether, gumming toys, a clutch ball, bathtub toys, motion toys, own drinking cup, a large crayon	Wood blocks, big outdoor toys, push and pull toys, slide, throwing ball (Nerf), building blocks, crayons, and paper Put together pots and pans, simple puzzle, stack rings on dowel, ball inside ball A childproof house	Give your child a toy to ride, finger manipulative toys Put together pots and pans, simple puzzle, stack rings on dowel, ball inside ball A childproof house Have child make placemat for next meal out of paper bags or cardboard	Give simple chores around house Give toys Put together pots and pans, simple puzzle, stack rings on dowel, ball inside ball A childproof house	Give simple chores around house Put together pots and pans, simple puzzle, stack rings on dowel, ball inside ball A childproof house

	0-6 months	6 months-1 year	1-2 years	2-3 years	3-4 years	4-5 years
MENTAL/INTELLECTUAL	Provide objects for baby to touch: your face, cuddly toy, smooth bedding To hear: talking, singing, laughing, a clock ticking, a rattle, soft music To see: bright pictures, mobile over crib, your smile, colored fabrics To do: reach and bat nearby objects	Imitate your child Give your baby tin cups, spoons, pot lids, nested plastic cups, cloth books, paper to mark on, a jack-in-the-box	A stacking tower Fitting toys Use diplomacy Picture books Read to child Say rhyming words Name months of year and days of week while child is being or getting dressed	Give shelves for toys, simple puzzles Help in putting things away Read to child Observe clouds and have child identify what cloud shape looks like Check the color of the sky in the morning and before going to bed	Give simple chores around house Give shelves for toys, simple puzzles Help in putting things away Read to child Walk in the rain and talk about why puddles form and where the water goes when the rain stops	Give simple chores around house Give shelves for toys, simple puzzles Help in putting things away Read to child Play letter games while traveling; look for a certain letter such as C on traffic signs, cars, bill boards, license plates
LANGUAGE	Talk and sing to baby Read to your baby Expose baby to voices speaking, clocks ticking, and chimes ringing Smile Make eye contact Good health promises good speech development	Identify things by name Call baby by name Make eye contact Not talking baby talk Smile Repeating what was said and expanding on it Say words slowly and clearly	Use simple, clear speech Talk to child about what you are going to do before you do it, while you're doing it, or after it's all over When using new words, make sure child can see the way you are saying them as well as hear them Listen to what child says and make child feel what is said is important Do not expect or demand perfection Give your child a toy telephone	Talk out loud about what you are hearing, doing, seeing, or feeling when your child is nearby Talk slowly, clearly, and use simple words and short phrases Let child listen to and talk to people on the phone Play "follow the leader" and "ring around the rosy" Read to your child Give child practice in following directions Sing to child	Praise Read stories and ask child questions Demonstrate the meaning of words (e.g., hop, book) Talk about ideas; let child know that they are important Work with rhyming words or words that start with the same sound Don't pressure your child Sing to and with child	Praise Read stories and ask child questions Go on planned trips, neighborhood walks, pointing out road signs, places, and things of interest Talk about ideas; let child know that they are important Encourage child to speak in complete sentences Don't pressure your child

Adapted from Rothenberg, B. A., et al. (1982). *Parentmaking: A practical handbook for teaching parent classes about babies and toddlers*. Menlo Park, CA: Banster Press.
Maehinney, V. T., & Petersen, C. J. (1986). *Child development: Parenting & teaching*. Cincinnati, OH: South-Western Publishing Company.
Creative living (3rd ed.). (1985). Mission Hills, CA: Glencoe/McGraw-Hill Publishing Company.

SUPPLEMENT 9

Safety Hazards

DIRECTIONS: The kitchen is the most hazardous room in the house. There are 36 safety hazards in the kitchen pictured here. How many can you identify? Briefly describe each that you find.

Source: Consumer Information Department of Corning Glass Works. (1985). In E.H. Brisbane, *The developing child.* (Student Guide) (p.137). Mission Hills, CA: Glencoe/McGraw-Hill Publishing Company.

SUPPLEMENT 10

Emergency Numbers

DIRECTIONS: Most people have trouble thinking and acting quickly and calmly in an emergency. Having emergency information on hand can save precious minutes.

Fill in the chart below with the appropriate information. Post the chart inside the door of your home medicine cabinet.

EMERGENCY INFORMATION

Home Address: _____

Home Phone Number: _____

Police: _____

Fire Department: _____

Ambulance: _____

Nearest hospital emergency room: _____

Children's Doctor: _____
Name Phone

Parent's Doctor: _____
Name Phone

Poison Control Center: _____
Location Phone

Neighbor, friend, or relative to contact in an emergency: _____

_____
Name Phone

_____
Address

Serious allergies or conditions of family members: _____

_____

_____

_____

Adapted from Brisbane, E.H. (1985). *The developing child* (Student Guide). Mission Hills, CA: Glencoe/McGraw-Hill Publishing Company.

SUPPLEMENT 11

What Should I Do When . . .

Decide what you would do as a parent in the following situations.

1. I realize the place where I live was built before 1940 and may have lead-painted walls.
2. I move into a place with stairs.
3. I smoke and leave matches and cigarettes lying on the tables.
4. My child can open doors and windows.
5. I have a loaded gun in the house.
6. I find my child making a peanut butter sandwich with a steak knife.
7. My child is fascinated with the toilet water.
8. The doorbell rings and I'm giving my child a bath.
9. I do not have a smoke alarm.
10. I find my child putting small objects from the carpet into his or her mouth.
11. My child likes to eat anything, including plants.
12. Several of my electrical cords are frayed.
13. Many of the outlets in my house are exposed.
14. I find myself carrying my child and a hot cup of coffee at the same time.
15. My child is playing under my feet while I am cooking at the range.
16. My child's ball rolls out into the street and my child runs after it.
17. My child climbs on top of cupboards.
18. I want to stay out in the sun and my child is getting sunburned.
19. My mother calls medicine "candy," and I find my child in the medicine cabinet.
20. My child seems to irritate my dog.

Adapted from *Adolescent parent resource guide*. (1989). Columbus: Ohio Department of Education.

SUPPLEMENT 12

Recommended Immunization Schedule

The American Academy of Pediatrics recommends that children be immunized and given tuberculin testing according to the immunization schedule below. Vaccine combinations and schedules are improved frequently, however, so that a physician can recommend what is best for you and your child. As each immunization is completed, it should be recorded on Supplement 13 (Immunization Record).

Birth or 1-2 months	First Dosage	Hepatitus B Vaccine
1-3 months	Second Dosage	Hepatitus B Vaccine
2 months	First Immunization	Combined Diphtheria-Tetanus-Pertussis (Whooping Cough)–Vaccine also called DTP Trivalent Oral Polio Vaccine Haemophilus Influenza Type B (Hib) or Conjugate Vaccine (Hib Titer) (meningitis)
4 months	Second Immunization	DTP Trivalent Oral Polio Vaccine Hib or Hib Titer*
6 months	Third Immunization	DTP Hib or Hib Titer **
6-18 months	Third Dosage	Hepatitus B Vaccine
12 months	Tuberculosis Skin Test	
15 months	Measles	Measles, Mumps, Rubella (combined in one shot or given singly) also called MMR
	Booster	Hib or Hib Titer
18 months	Booster Booster	DTP Trivalent Oral Polio Vaccine
4- 6 years	Booster Booster Booster	DTP Trivalent Oral Polio Vaccine Tuberculosis Skin Test MMR***
14-16 years	Booster	Combined Tetanus-Diphtheria
Thereafter every 10 years	Booster	Combined Tetanus-Diphtheria

* This dose may not be required, depending on which Hib vaccine is used.
** This dose may be given at twelve months, depending on which Hib vaccine is used.
*** Some doctors may recommend that this dose of MMR vaccine be given at entry to middle or junior high school.

Current as of August 1992

SUPPLEMENT 13

Immunization Record

Enter month and year of completed series, boosters, and single immunizations.

	Child date rec'd	Child date rec'd	Child date rec'd	Mother date rec'd	Father date rec'd
Diphtheria-Tetanus-Pertussis					
1st					
2nd					
3rd					
Booster					
Booster					
Trivalent Polio					
1st Dose					
2nd Dose					
3rd Dose					
Booster					
Tuberculosis Skin Test					
1st					
2nd					
3rd					
Measles/Mumps/Rubella					
1st					
Booster					
Haemophilus Influenza					
1st					
2nd					
3rd					
Booster					
Hepatitus Vaccine					
1st					
2nd					
3rd					
Tetanus Immunizations given after an Injury					

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Strengthening Parenting Skills - Notes

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WORLD-CLASS EDUCATION FOR THE 21ST CENTURY: THE CHALLENGE AND THE VISION

VISION STATEMENT

As we approach the 21st century, there is broad-based agreement that the education we provide for our children will determine America's future role in the community of nations, the character of our society, and the quality of our individual lives. Thus, education has become the most important responsibility of our nation and our state, with an imperative for bold new directions and renewed commitments.

To meet the global challenges this responsibility presents, the State of Illinois will provide the leadership necessary to guarantee access to a system of high-quality public education. This system will develop in all students the knowledge, understanding, skills and attitudes that will enable all residents to lead productive and fulfilling lives in a complex and changing society. All students will be provided appropriate and adequate opportunities to learn to:

- communicate with words, numbers, visual images, symbols and sounds;
- think analytically and creatively, and be able to solve problems to meet personal, social and academic needs;
- develop physical and emotional well-being;
- contribute as citizens in local, state, national and global communities;
- work independently and cooperatively in groups;
- understand and appreciate the diversity of our world and the interdependence of its peoples;
- contribute to the economic well-being of society; and
- continue to learn throughout their lives.

MISSION STATEMENT

The State Board of Education believes that the current educational system is not meeting the needs of the people of Illinois. Substantial change is needed to fulfill this responsibility. The State Board of Education will provide the leadership necessary to begin this process of change by committing to the following goals.

ILLINOIS GOALS

1. Each Illinois public school student will exhibit mastery of the learner outcomes defined in the State Goals for Learning, demonstrate the ability to solve problems and perform tasks requiring higher-order thinking skills, and be prepared to succeed in our diverse society and the global work force.

2. All people of Illinois will be literate, lifelong learners who are knowledgeable about the rights and responsibilities of citizenship and able to contribute to the social and economic well-being of our diverse, global society.

3. All Illinois public school students will be served by an education delivery system which focuses on student outcomes; promotes maximum flexibility for shared decision making at the local level; and has an accountability process which includes rewards, interventions and assistance for schools.

4. All Illinois public school students will have access to schools and classrooms with highly qualified and effective professionals who ensure that students achieve high levels of learning.

5. All Illinois public school students will attend schools which effectively use technology as a resource to support student learning and improve operational efficiency.

6. All Illinois public school students will attend schools which actively develop the support, involvement and commitment of their community by the establishment of partnerships and/or linkages to ensure the success of all students.

7. Every Illinois public school student will attend a school that is supported by an adequate, equitable, stable and predictable system of finance.

8. Each child in Illinois will receive the support services necessary to enter the public school system ready to learn and progress successfully through school. The public school system will serve as a leader in collaborative efforts among private and public agencies so that comprehensive and coordinated health, human and social services reach children and their families.

Developed by citizens of Illinois through a process supported by the Governor, the Illinois State Board of Education and the Illinois Business Roundtable. Adopted as a centerpiece for school improvement efforts.

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ILLINOIS STATE BOARD OF EDUCATION
100 North First Street, Springfield, Illinois 62777-0001

Michael W. Skarr, *Chairperson, Illinois State Board of Education*
Joseph A. Spagnolo, *State Superintendent of Education*

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